

**Local Authority Health Scrutiny
Proposals for consultation July 2012**

Draft LB Bromley Response

- Q1 Do you consider that it would be helpful for regulations to place a requirement on the NHS and local authorities to publish clear timescales? Please give reasons

We would agree that the absence of clear locally agreed timetables can lead to uncertainty about when key decisions will be taken during the lifetime of a reconfiguration programme.

- Q2 Would you welcome indicative timescales being provided in guidance? What would be the likely benefits and disadvantages of this?

Whilst indicative timescales would be useful we agree that it is right to allow local flexibility for the adoption of timetables that are appropriate to the nature and complexity of any change. Publishing the date that an intended decision will be made seems sensible.

- Q3. Do you consider it appropriate that financial considerations should form part of local authority referrals? Please give reasons for your view.

We agree that with the closer working of the NHS and Local Authorities is would make sense that the financial sustainability of the proposal be examined as part of the health scrutiny of a proposal. We would agree that Local authorities will need support and information.

- Q4. Given the new system landscape and the proposed role of the NHS Commissioning Board, do you consider it helpful that there should be a first referral stage to the NHS Commissioning Board?

The introduction of an intermediate referral stage, where local authorities make an initial referral application to the NHS Commissioning Board would seem to make sense.

- Q5. Would there be any additional benefits and drawbacks of establishing this intermediate referral?

The benefit would be local resolution which may be able to happen more timely. Or equally if not resolved it could delay the process by having an additional step.

- Q6. In what other ways might the referral process be made to more accurately reflect the autonomy in the new commissioning system and emphasise the local resolution of disputes?

- Q7. Do you consider it would be helpful for referrals to have to be made by the full council?

Whilst we would agree that given the enhanced leadership role for local authorities in health and social care full council should support any decision to refer a proposed service change, either to the NHS Commissioning Board or to Secretary of State. We feel that the full council should be able to delegate to a committee. As practically the Health Scrutiny committee would be overseeing the detail of a particular proposal which would then need to be presented at full council.

Q8. Do you agree that the formation of joint overview and scrutiny arrangements should be incorporated into regulations for substantial service developments or variations where more than one local authority is consulted? If not, why not?

Q9. Are there additional equalities issues with these proposals that we have not identified? Will any groups be at a disadvantage?

None specifically.

Q10. For each of the proposals, can you provide any additional reasons that support the proposed approach or reasons that support the current position? Have you suggestions for an alternative approach, with reasons?

Q11. What other issues relevant to the proposals we have set out should we be considering as part of this consultation? Is there anything that should be included that isn't?